Provider Name:			Address:				Phone:		
D'Nell Lopez			Albuquerque, NM 87110				(505)903-4416		
Registration Num	Issue Date:	Expiration I	Date:	Туре:	Type: Status:				
155441	11/1/2016	10/31/2017	Child Care Reg. Self-Cert Part			Registered			
Capacity				•		Cei	nsus		
Over Age 2: 4	Under Age 2:	2 Night	Care:	0 Pl	ayground: 0	Ove	r 2: 4	Under 2	2: 0
Days and Hours of Operation									
	<u>Monday</u>	<u>Tuesda</u>	<u>y</u> <u>W</u>	<u>ednesday</u>	<u>Thursday</u>	Fri	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times	: 06:00 AM	06:00 Al	VI (	06:00 AM	06:00 AM	06:0	0 AM	Closed	Closed
Closing Times	: 06:00 PM	06:00 PI	M (	06:00 PM	06:00 PM	06:0	0 PM		
# of Classrooms:	Pu	rpose:		•	Date:		Ti	ime:	
0	An	nual			08/07/2017		09	9:51 AM	
		•		•				•	•

## Comments

BCU 4/4/2017(SUBSIDY & FOOD)

CACFP 2/2/2017

CURRENT YEAR TRAINING 4 HOURS (NEEDS 2 MORE HOURS BY 10/31/2017, WILL STAFF CACFP TRAINING)

PREVIOUS YEAR TRAINING 13 HOURS

PEDIATRIC CPR & FIRST AID COMPLETED ON 9/10/2015, RENEWAL DATE 9/10/2017

HEALTH & SAFETY ORIENTATION COMPLETED ON (PROVIDER WILL PROVIDE DATE ON CERTIFICATE)

- \*PROVIDER CARES FOR CHILDREN TOTAL: 5 TOTAL 2 RESIDENT (10,12) & 3 NON-RESIDENT CHILDREN (3,4,4)
- \*LEFT COPY OF REGULATIONS
- \*DISCUSSED WITH PROVIDER ENROLLMENT DATES AND TRAINING REQUIREMENTS
- \*PROVIDER STATED WOOD FIRE PLACE IS NOT USED DURING CHILD CARE HOURS
- \*FIRE EXTINGUISHER NEEDS TO BE RE-CERTIFIED BY 9/2017
- \*TRAMPOLINE IS NOT USED DURING CHILD CARE HOURS

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:				
Registration				
8.17.2.11 A,B BACKGROUND CHECKS	Compliance			
8.17.2.11 C OTHER PERSONS BACKGROUND CHECKS	N/A			
8.17.2.11 E DOCUMENTATION	Compliance			
8.17.2.13 VISITS BY AGENCY AND REGISTERED AUTHORITY	Compliance			
8.17.2.14 A-C NON-TRANSFERABILITY OF REGISTRATION	Compliance			
8.17.2.15 A-C INCIDENT REPORTS	Compliance			
Record Keeping Requirements				
8.17.2.24 RECORD KEEPING REQUIREMENTS	Non-compliance			

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Provider Name:	Registration Number:	Date:
D'Nell Lopez	155441	08/07/2017

## **Record Keeping Requirements**

## **Deficiencies**

Information card is missing known food or drug allergies; name, telephone number, and location of a parent of other responsible adult to be contacted in any emergency; an immunization record showing current, age-appropriate immunizations for each child or a written waiver for immunizations granted by the department of health.

- \*UPDATED SHOT RECORDS FOR 2 NON-RESIDENT CHILDREN
- \*ANY KNOWN FOOD OR DRUG ALLERGIES FOR 1 NON-RESIDENT CHILD
- \*EMERGENCY CONTACT PERSON FOR 1 NON-RESIDENT CHILD

Regulation: 8.17.2.24

## **Corrective Action Plan**

Caregivers will collect and have parent/guardian complete/fill in any missing information on each child's information card.

Date to be Completed: 09/07/2017

Caregiver Requirements	,
8.17.2.10 A CAREGIVER REIMBURSEMENTS	Compliance
8.17.2.10 B AGE REQUIREMENT	Compliance
8.17.2.10 E F CAREGIVER REPORTING	Compliance
8.17.2.10 G PRIMARY AND SUBSTITUTE CAREGIVER TRAINING	Compliance
8.17.2.10 H PRIMARY AND SUBSTITUTE CAREGIVER TRAINING	Compliance
8.17.2.10 I PRIMARY CAREGIVER FOR INFANTS	Compliance
8.17.2.10 K CPR AND FIRST AID CERTIFICATION	Compliance
8.17.2.10 L COMPETENCY TRAINING	Compliance
Group Composition	
8.17.2.21 A NON-RESIDENT CHILDREN	Compliance
8.17.2.21 B CHILDREN UNDER 2	Compliance
8.17.2.21 C CHILDREN UNDER 6	Compliance
8.17.2.21 D DROP IN CHILDREN	Compliance
8.17.2.21 E SHIFT CHANGES	Compliance
8.17.2.21 F CAREGIVER INVOLVEMENT	Compliance
Health & Safety Requirements	·
8.17.2.22 A SAFE CONDITION	Compliance
8.17.2.22 B, C ELECTRICAL OUTLETS	Compliance
8.17.2.22 D TEMPERATURE	Compliance
8.17.2.22 E VENTILATION	Compliance
8.17.2.22 F HEATERS AND HEATING UNITS	N/A
8.17.2.22 G HOT AND COLD RUNNING WATER	Compliance
8.17.2.22 H, I, J INSIDE AND OUTSIDE PLAY AREAS	Compliance
8.17.2.22 K STORAGE OF DANGEROUS MATERIALS	Compliance

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Provider Name: D'Nell Lopez	Registration Number:	Date: 08/07/2017	
	afety Requirements		
8.17.2.22 L WORKING TELEPHONE	alety Requirements		Compliance
8.17.2.22 M EMERGENCY NUMBERS			Compliance
8.17.2.22 N SMOKE / CARBON MONOXIDE DETECTOR			Compliance
8.17.2.22 O,P FIREARM SAFETY/STORAGE			N/A
8.17.2.22 Q. SMOKING, ALCOHOL, AND ILLEGAL DRUG USE			Compliance
8.17.2.22 R FIRE EXTINGUISHER			Compliance
8.17.2.22 S COMBUSTIBLE AND FLAMMABLE MATERIALS			Compliance
8.17.2.22 T EMERGENCY EVACUATION AND DIASTER PREPAREDNE	SS PLAN		Compliance
8.17.2.22 U MAJOR EXITS			Compliance
8.17.2.22 V TOYS, OBJECTS AND CRIB STANDARDS			Compliance
8.17.2.22 W TOILET ROOMS			Compliance
8.17.2.22 X FIRST AID KIT			Compliance
8.17.2.22 Y PETS			N/A
8.17.2.22 Z DIAPER CHANGING			N/A
8.17.2.22 AA TRANSPORTATION			N/A
Meal	Requirements		
8.17.2.23 H REFRIGERATION			Compliance
8.17.2.23 I REFRIGERATOR THERMOMETERS			Compliance
Caregiver	's Responsibilities		
8.17.2.25 A,B SUPERVISION			Compliance
8.17.2.25 C GUIDANCE			Compliance
8.17.2.25 D POLICIES AND PROCEDURES FOR EXPULSION			Compliance
8.17.2.25 E ACTIVITIES AND EXPERIENCES			Compliance
8.17.2.25 F CARING FOR INFANTS			N/A
8.17.25 G. REST PERIODS			Compliance
8.17.25 H SWIMMING, WADING AND WATER			N/A

Please note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans as noted above, may result in further action taken against the provider.

08/07/2017

08/07/2017

Surveyor:Amanda Trujillo

Date

Provider Rep:D'Nell Lopez

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Date